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Gustavo Siller, Jr.

Name of Applicant, assignee or Registered Representative

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Our Case No. 9281-3561

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Takayuki Sugawara et al.

Serial No. 09/511,931

Filing Date: February 24, 2000

For Disk Device with Improved Error-Correction Capability

Group Art Unit 2753

REQUEST FOR CORRECTION OF FILING RECEIPT

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Applicants have enclosed a copy of the official Filing Receipt and request the issuance of a corrected Filing Receipt for the above-identified application.

Please delete inventor "Isano Asano's" name and substitute

--Isao Asano--.

The Commissioner is hereby authorized to charge any fees required to Deposit Account No. 23-1925. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

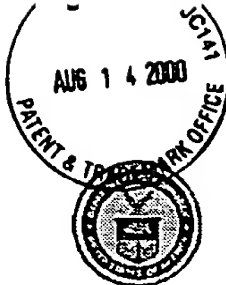
Gustavo Siller, Jr.
Registration No. 32,305
Attorney for Applicants

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P.O. BOX 10395
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FILING RECEIPT



OC00000005095865

UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark OfficeAddress: ASSISTANT SECRETARY AND
COMMISSIONER OF PATENT AND TRADEMARKS
Washington, D.C. 20231

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/511,931	02/24/2000	2753	690	9281-3561	3	3	1

Brinks Hofer Gilson & Lione
P O Box 10395
Chicago, IL 60610

Date Mailed: 05/04/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Takayuki Sugawara, Fukushima-ken, JAPAN;
Hiroki Hirashima, Fukushima-ken, JAPAN;
Isano Asano, Kukushima-ken, JAPAN;
Kyoichi Shirane, Kanagawa-ken, JAPAN;

Continuing Data as Claimed by Applicant

Foreign Applications

JAPAN 11-047937 02/25/1999

If Required, Foreign Filing License Granted 05/04/2000

**

Title

Disk device with improved error-correction capability

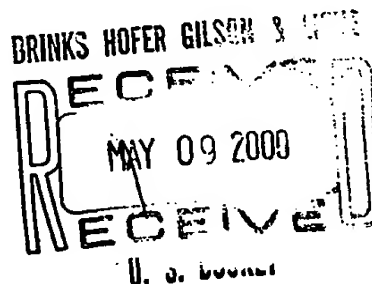
Preliminary Class

360

Data entry by : WYATT, DEBRA

Team : OIPE

Date: 05/04/2000



1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

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Bib Data Sheet

UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark OfficeAddress: COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

SERIAL NUMBER 09/511,931	FILING DATE 02/24/2000 RULE -	CLASS 360	GROUP ART UNIT 2753	ATTORNEY DOCKET NO. 9281-3561
APPLICANTS Takayuki Sugawara, Fukushima-ken, JAPAN; Hiroki Hirashima, Fukushima-ken, JAPAN; Isao Asano, Kukushima-ken, JAPAN; Kyoichi Shirane, Kanagawa-ken, JAPAN;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS ***** JAPAN 11-047937 02/25/1999				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 05/04/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance		STATE OR COUNTRY JAPAN	SHEETS DRAWING 3	TOTAL CLAIMS 3
Verified and Acknowledged Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 1		
ADDRESS Brinks Hofer Gilson & Lione P O Box 10395 Chicago, IL 60610 <i>Customer # 757</i>				
TITLE Disk device with improved error-correction capability				
FILING FEE RECEIVED 690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	